

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>rw</i>	TS331	
O.I.P.E. CLASSIFIER		59	629
FORMALITY REVIEW	D.B	65373	7-9-99

9/21/99

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)..... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Final	Original	Date
1	✓	8/2/02	
2	✓	8/2/02	
3	✓	8/2/02	
4	✓	8/2/02	
5	✓	8/2/02	
6	✓	8/2/02	
7	✓	8/2/02	
8	✓	8/2/02	
9	✓	8/2/02	
10	✓	8/2/02	
11	✓	8/2/02	
12	✓	8/2/02	
13	✓	8/2/02	
14	✓	8/2/02	
15	✓	8/2/02	
16	✓	8/2/02	
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Claim	Final	Original	Date
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